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SELF-CONTROL APPLICATIONS TO COUNSELOR EDUCATION

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ABSTRACT

An argument is made that all counseling should be aimed at eventually transforming helpees into helpers. The method of achieving this aim is to develop the client's skills of behavior change. The manner of encouraging these "counselor skills" involves the achievement of self-acceptance through two possible approaches: Magic and self-control. Although not totally without magic, the teaching of the self-control approach seems to be the more likely choice. Thus, the implementation of self-control projects by clients, counselor-trainees, and counselor-educators is encouraged.

SELF-CONTROL APPLICATIONS TO COUNSELOR EDUCATION

All of counseling, at whatever level it occurs, is counselor education, and university professors should not be alone in claiming the title "counselor educator!"

What does this statement mean? The point made in this assumption is that counseling practitioners should realize that the most effective outcome of a series of counseling contacts is not simply a well-adjusted client, but it is also a new counselor! If the counselor's job has been maximally carried out, the client will have learned certain skills that will be of value in alleviating any new concerns and unexpected dilemmas. Additionally, this client should have the ability to employ these same skills to aid others (Carkhuff, 1971). A brief outline of the implications of this conceptual idea is presented in Table 1.

Insert Table 1 about here

The skills that will allow the client to subsequently become a counselor and the counselor to become a counselor-educator are those of self-modification and self-control. It is the potential use of such approaches in the broad context of counselor education that is the focus of this paper.

THE IMPORTANCE OF SELF-ACCEPTANCE

Perhaps all counselors would agree that the development of self-sufficiency or self-control occurs concurrently with successful counseling. Not all, however, would concur on the process of "teaching" those skills. Much of the literature of counseling has devoted attention to one major goal and, seemlingly, assumed that with the attainment of that goal, self-sufficiency would be established. Although the reader may be guessing that the major goal of earlier counseling theories has been "awareness"

or "insight", this writer feels that the final goal even in the "insight approaches" is one step further: "self-acceptance."

To breifly substantiate the importance of self-acceptance to counseling theory, one might allude to the works of Rogers, Ellis, Harris, and recent popular literature. Rogers (1951) discusses the importance of the dissolution of the "conditions of worth" in client-centered therapy. Conditions of worth are, in essence, covert thoughts that are inconsistent with a person's experiential awareness. In order to become self-sufficient, a client needs to eliminate these "shoulds," "oughts", and "musts" which create a lack of acceptance of ones own feelings. Ellis (1962) encourages therapists to directly attack a client's irrational thoughts and beliefs in Rational Emotive Therapy. These irrational thoughts are normally self-deprecating, and therefore, to eliminate them is to increase one's self-acceptance. Harris (1969) and Berne (1961) have described how important the reestablishment of the "I'm O.K." life position is to successful outcomes in transactional analysis. Finally, in building an argument for the perceived importance of self-acceptance to growth and change in counseling, mention should be made of the plethora of "self-help" books on the popular market. Peale's Power of Positive Thinking (1952), Bach's Johnathan Livingston Seagull (1970), and the Berkowitzes' How to be Your Own Best Friend (1973), are all selling the same message: You've got to accept yourself!

Although many counselors who are behavioral in orientation may not attend to the message inherent in all of this accumulated literature, it nonetheless is there: self-acceptance may not be the only goal for counselor education, but it may well be a prerequisite for any other goals! We may need to be self-accepting before we can offer help to others!

It appears to this writer, then, that our first step in a counselor education program (in either our traditional definition of counselor education or in the broader perspective suggested in this paper) should be to develop self-acceptance. How can we accomplish this task? Initially, of course, we must define "self-acceptance." A view which seems to fit quite well the notions of the theorists previously cited is that a lack of self-acceptance involves the occurrence of covert, negative, irrational thoughts within the individual. We might call these covert "thoughts" "conditions of worth," "irrationaliities," or "I'm not O.K.s," but whatever title we give them, they are, in essence, a "nonsense in the head" which tells a person of certain unacceptable qualities and behaviors. Thus, self-acceptance is defined as the internal state of an individual who lacks debilitating, irrational, self-defeating thoughts.

Employing this definition clarifies the unquestioned maxim that counselors should be self-accepting during their counseling activities. Before they can most effectively hear and understand their clients, counselors need to clear their brains of self-defeating thoughts. Our minds are incapable of thinking two thoughts at the same time! The more attention we give to self-deprecation (e.g., "I shouldn't have said that," "I'm really sounding like an idiot," or "What can I say next time now that I've blown it?") the less available "brain time" there is to hear and to integrate what the client is saying.

TEACHING SELF-ACCEPTANCE

Suggestions and ideas as to how to develop self-acceptance abound in the counseling literature. This writer, however, sees all possible approaches as collapsible into two general categories.

Magic

The first of these two methods of encouraging self-acceptance is the older and more established mode of procedure: magic! Magic is defined as the creation of a belief system that will allow the magician to say to a client "You are well," and have the client <u>believe</u> that to be true. Psychological research substantiates the impressive contributions to behavior change made by such "magical" phenomenon as placebo effects, Hawthorne effects, persuasion, and expectations (Fish, 1973; Frank, 1973). Faith healers, as another example, do in fact work miracle cures in some cases. Certainly, counselors and therapists must realize that, in part, the effectiveness of their therapy is that the client knows the counselor's reputation (magic) and believes that changes will occur!

As counselor educators, then, we should maximize our "magic" to maximize our effectiveness in creating self-acceptance in counselor-trainees. The attempted implementation of magic, however, runs into difficulty in that we do not know at this point what factors best operate to improve the client's belief in our "powers." Degrees hanging on the wall, a professional demeanor, national prestige, and personal charisma may all help, but research has not yet told us all we'd like to know about magic!

There are other difficulties inherent in the magical approach to developing self-acceptance. First of all, the temporary nature of most magic is a major concern. Unless the environment supports the self-accepting belief system, a relapse is very likely. The classic example is that of the group participant who is exhilerated and enlivened by the encounter in the mountains only to find no lasting changes a mere two weeks later. Secondly, there are many counselor educators who would be very uncomfortable with the

implementation of magic as a result of personal characteristics, situational factors, or both. Finally, magic may sometimes create "over-accepting monsters." Such failures in the system are people who have become accepting of themselves beyond their own levels of awareness. Thus, these people might be able to hurt and destroy others without being aware of the consequences of their actions and without any apparent lack of self-acceptance.

Self-control

If magic has its faults, then perhaps we should consider the second general method of encouraging self-acceptance. The second manner of achieving self-acceptance should not be a surprise: self-control (Thoresen and Mahoney, 1974; Mahoney and Thoreson, 1974). Definitionally, self-control is nothing more than clients acting to direct and manage their own changes in behavior. When people learn that <u>they</u> have control over their own behaviors, they realize that undesired behaviors are alterable and need not be continued sources of self-deprecation. Those behaviors which are positive can be increased as those which are negative are eliminated. Initial self-change projects are often designed on a small scale to guarantee success, (and self-acceptance). Until a learner experiences success, s/he may not believe it can be accomplished. One success, however, will lead to another, and the next self-change attempt may well involve more complex change (and more prevalent and <u>permanent</u> self-acceptance). The skills of self-control are sufficiently powerful to <u>prove</u> to the clients that they are unusual, that they are unique, and that they are <u>acceptable</u>!

Self-acceptance, it must be remembered, does not imply that a person is totally satisfied with all aspects of life. Self-acceptance, in being the lack of irrational "self-put-downs", implies the ability to say to oneself:

"Yes, I've made a mistake, and I don't like this behavior. Now I'll have to do something about it!" Self-control is the "doing something about it!" We fortunately do not need to be perfect to be accepted.

Although as counselor educator we would in no way wish to eliminate the helpful aspects of magic in our work, it is clear in many ways that self-control is often the desired manner of developing self-acceptance. Certainly, self-control is not without magical components itself, but the process includes features designed to make permanent changes and to create skills which are useful again and again. Also, the implementation of self-control program often requires little more than the knowledge of the instructor (the counselor educator). Finally, the "over-accepting monster" is unlikely because of the emphasis on the use of self-awareness and self-monitoring in the self-control process.

The corridor to self-acceptance is undoubtedly self-control! Lest we become blinded by the simplicity of this statement, however, we must remember that self-control cannot occur instantaneously. It takes time and concentrated efforts: Although self-control is the corridor to self-acceptance, it is one with many turns and more than a few detours.

TEACHING SELF-CONTROL

The last question which must logically be raised is "How do counselor educators teach other 'counselor educators' self-control?" The answer is straightforward: we teach by doing! We model self-change for our students and our clients, and we ask them to do likewise. Often, the only way to know how to teach a subject effectively is to experience it yourself. The first step, a first successive approximation, of effective counseling is to plan and carry out a self-control project (Watson & Tharp, 1972). This

prepares the "counselor educator trainee" to offer similar aids to present and future clients.

The stages in a self-control program are carefully discussed prior to implementation so as to insure maximal effectiveness of the project and maximal retention of the principles at a later time: (a) the behavior to be altered must be operationally specified; (b) a careful self-observation period is used to establish baseline; (c) realistic behavioral goals are determined; (d) successive approximations are integrated with certain antecedent- or consequence-oriented strategies for change; and, finally, (e) behavior change is attempted and carefully evaluated for additional possible alterations. At the end of counseling, the client has developed these skills with sufficient clarity to be able to suggest help to friends or relatives who may need to make certain changes within themselves. The difficulties and questions that the client has had will serve as excellent cues to ward off similar problems in future "counseling" contacts. (Again, Table 1 contains an overview of this process.)

Ideally, these client-counselors will develop more and more skill in consulting on the self-change projects of others. They might perhaps choose to increase their helping behaviors through personal self-change projects. For example, appropriate targets for self-change might include listening skills and empathic communication. This kind of additional growth, although desired in all clients, would, of course, be required of those enrolled in graduate programs in counseling.

Self-control projects clearly add unique inputs to counseling and to counselor training. They are a source of powerful cognitive and experiential impact upon trainees and clients.

In summary,

A calm and happy counselee, this story has detailed
Of a long trip through therapy and the changes it entailed.
"I have believed in magic and sought a lucky charm:
A power to ward evil off and keep me safe from harm."
"In the course of therapy, I found just such a talisman,
But when I looked upon it, no magic did it hold.
For on its shiny surface was my face reflected in the gold."
"I can seek attention: Ask friends to comfort and console,
But I must also be aware, my final answer's sel -control."

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TABLE 1

Development of the Self Control Process through Counselor Education

	SETTINGS	TYPE OF COUNSELOR EDUCATORS	LEARNERS
Level I	Universities	Academic Counselor Educators	Counselor Trainees
Level II	Institutions and Agencies for the Helping Services	Trained Counselors	Clients
Level III	The Larger Community (including places of business, homes of clients and friends, etc.)	Clients with self-control skills	Relatives, friends, and neighbors
Level IV	The Larger Community	Self-controlled friends and neighbors	Others
Level V	. . .	. . .	. . .